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34228 7590 10/02/2006

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April D. Kaplan	(Depositor's name)
<i>April D. Kaplan</i>	(Signature)
December 18, 2006	

(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/698,334	10/31/2003	Art Moskowitz	151P11699US01	9684

TITLE OF INVENTION: APPARATUS AND MÉTHÔD FOR RETRÓGRADE PLACEMENT OF SAGITAL SINUS DRAINAGE CATHETER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE (2006)	PREV. PAID PUBLICATION FEE (2006)	18698334
nonprovisional	NO	\$1400	\$300	\$0	01 FC:1504 \$1700 1400.00 DA	01/02/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS		02 FC:1504 300.00 DA	
BLANCO, PATRICIA		3761	604-523000		03 FC:8001 6.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2 For printing on the patent front page, list  
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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Medtronic, Inc.

Minneapolis, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

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a. Applicant claiming SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *William D. Bauer*

Date December 18, 2006

Typed or printed name William D. Bauer

Registration No. 28,052

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and transmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PATENT

Attorney Docket No.	Serial No.
151P11699US01	10/698,334

FACSIMILE TRANSMITTAL LETTER

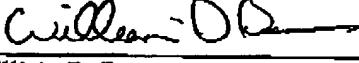
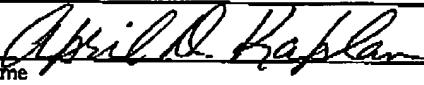
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TOTAL NO. OF PAGES: 3  
Sent to Facsimile No.: 571-273-8300  
Examiner Phone No.: 571-272-4940

In re Application of:	Ari Moskowitz		
Serial No.:	10/698,334	Examiner:	Bianco, Patricia
Confirmation No.:	9684	Art Unit:	3761
Filed:	October 31, 2003		
For:	APPARATUS & METHOD FOR RETROGRADE PLACEMENT OF SAGITAL SINUS DRAINAGE CATHETER		
We are transmitting the following documents:			
Facsimile Transmittal Letter [1 page] Part B - Fee Transmittal [1 page] Fee Address Indication Form [1 page]			

Please charge Deposit Account 50-0549 for any fees under 37 CFR §1.16 and §1.17 that may be required during the pendency of this application. This authorization includes the fee for any extension of time under 37 CFR §1.136(a) that may be necessary. To the extent any such extension should become necessary it is hereby requested.

Respectfully submitted,

Registration No. 28,052	Direct Dial 612-331-7405	
Date: December 18, 2006	William D. Bauer	
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To Facsimile Number 571-273-8300	Signature	
Date December 18, 2006	Printed Name	April D. Kaplan

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